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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/260,724 01/09/2001 *mm*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 02/05/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no Allowance	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after	STATE OR COUNTRY GA	SHEETS DRAWING 6	TOTAL CLAIMS 54	INDEPENDENT CLAIMS 4
Verified and Acknowledged	Examiner's Signature <i>mm</i>	Initials				

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TITLE

Multiple band ligator and anoscope system and method for using same

FILING FEE RECEIVED 1018	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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